PATENT APPLICATION FEE DETERMINATION RECO							Application or Docket Number					
. PATEN!		N FEE I			ion recc	PD		108	12	945	• 	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
TOTAL CLAMS		12					RATE	FEE].	RATE	FEE	
FOR		MIMBER FRED.		MUMBER EXTRA		ŀ	lasic fe	385.00	POR	BASIC FEI	770.00	
TOTAL CHARGEABLE CLAIMS		/1_ minus 20=		•			X\$ 9-		OR	X\$18=		
INDEPENDENT CLASS		/ minus 3 =		•		Ī	X43=		OR	X86=		
MULTIPLE DEPE	NDENT CLAIM P	RESENT	•	(3)		. †	+145=	1	7			
If the difference	e în çolumi: 1 is	less than zero, enter "O" in column 2			L	TOTAL	 -	OR	+290-	290		
CI AIMS AS AMEDINEN - DART B							IOIAL	<u></u>]OR	TOTAL	LOGO	
(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	CR	SMALL		
	CLAMS REMAINING AFTER AMENDMENS		HUMB HUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE	
Total Independent	-1521	Minus	- ·Z	م'	-/		es ex		ON	X\$18=	50	
Independent	NTATION OF M	Minus	7		ليها	Γ	×43-		OR	XSS		
PIPST PRESE	NIAHON OF W	Lince De	PERDERI	CLAIM		Γ	145=		OR	+290=		
1 /					•		TOTAL		OR.	TOTAL	7	
18/06	(Column 1)		(Colum	n 2)	(Column 3)	AD	DIT. FEE			yport, FEE!		
·	CLAMS REMAINING . AFTER AMENOMENT		HIGHE NAME PREVIOU PAID P	ER JSLY	PRESENT EXTRA	T.	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total ·	. 15	Minus	-2	/	. —	1	CS 9-		OR	X312=	725	
independent	• 2	Minus	 5	3	•	١,	(43= .	•		X86-		
PRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT C	ZAM				-	OR			
						Ŀ	145- TOTAL		OR	+220-		
•			•		•	ADD	II. FEE		OR ,	CON. PEE	<u> </u>	
· / /	(Column 1)	- 1	COLUMN		Column 3)	· ·	·		•	•		
9/11/06	REMAINING AFTER AMENDMENT		PREVIOU PAID PO	SLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
		Minus	- .∂		0.	×	39=		OR	X318c	./	
	TATION OF MU	Minus	en Entre A	-		×	43-		OR	X860		
		·	ENDER! (• • •	الـــــــــــــــــــــــــــــــــــــ		45-		OR	+280°	7	
i the crity in column	the orby in exhann 1 is less than the entry in column 2, write "0" in column 3. The "Righest Number Productly Paid For" IN THIS SPACE is less than 20, easy "20."								ر د	TOTAL		
I the Tilghost Num The Tilghest Huse		T. FEEL	wisto box	A	DORT, FEEL							
				,				•	• • •	•		
PTO-075 (Res. 100					. A		Testate	a Come VI	L DEPA	need or c		
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